

Slate Mailer Organization Campaign Statement

(Government Code Sections 84218-84219)

Type or print in ink.

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

Statement Covers Period

from 07/01/2017

through 12/31/2017

Date Stamp

CALIFORNIA
1992 FORM **401**

1/4

FOR OFFICIAL USE ONLY

I Slate Mailer Organization Information

FULL NAME OF SLATE MAILER ORGANIZATION:

Educate Your Vote

ID NUMBER

1345655

ADDRESS NO AND STREET

CITY STATE ZIP CODE PHONE NUMBER

Encino CA 91436

NAME OF TREASURER:

Jane Leiderman

ADDRESS NO AND STREET

CITY STATE ZIP CODE DAYTIME PHONE NUMBER

Encino CA 91436

II Is This A General Purpose Committee?

If this Slate Mailer Organization is also a "general purpose committee" as defined in Government Code Section 82027.5, check box and attach the committee's campaign disclosure report to this statement.

☐

Committee Report
Attached

☐

ID Number if
Recipient Committee

III Summary of Payments

	(A) Total This Period	(B) Cumulative to Date (Since January 1 of calendar year covered)
1 TOTAL PAYMENTS RECEIVED	\$ <u>13101.00</u> Sch. A, Line 3	\$ <u>14141.00</u>
2 TOTAL PAYMENTS MADE	\$ <u>14925.00</u> Sch. B, Line 3	\$ <u>38465.00</u>

IV Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2018
DATE

At _____
CITY AND STATE

By Samantha Stevens
SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer Samantha Stevens
TYPE OR PRINT

Title: Officer (Reponsible)

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE

INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT FOR SLATE MAILER ORGANIZATIONS.

State of California Fair Political Practices Commission

Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	CALIFORNIA 1992 FORM 401
	2/4
I.D NUMBER 1345655	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Educate Your Vote

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT OPPOSE		
11/16/2017 	Andy Thorburn for Congress Washington DC 20003 Reference No:	Other -- Federal Committee - CD 39 CD 39	X	3400.00	3400.00
12/26/2017 	John Valdivia for Mayor Riverside CA 92501 Reference No:	Mayor	X	800.00	800.00
11/08/2017 	Parrish for Orange County Assessor Santa Ana CA 92705 Reference No:	Assessor	X	901.00	901.00

SUBTOTAL

\$

Summary

- Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ 13101.00
- Amount Received - Payments of Less than \$100
(Not itemized) \$ 0.00
- Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ 13101.00

Schedule A Payments Received

SCHEDULE A

Statement covers period from <u>07/01/2017</u> through <u>12/31/2017</u>	CALIFORNIA 1992 FORM 401
	3/4
I.D NUMBER 1345655	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Educate Your Vote

(1)	(2)	(3)		(4)	(5)
DATE RECEIVED	IDENTIFICATION OF PERSONS FROM WHOM \$100 OR MORE HAS BEEN RECEIVED THIS PERIOD (SEE IMPORTANT INSTRUCTIONS ON REVERSE)	(a)	(b)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED SINCE JANUARY 1 PER CANDIDATE
		NAME, OFFICE SOUGHT, AND JURISDICTION OF CANDIDATE/ NAME, JURISDICTION, AND NUMBER OR LETTER OF BALLOT MEASURE SUPPORTED OR OPPOSED (IF DIFFERENT THAN COLUMN 2)	CHECK BOX TO INDICATE IF PAYMENT WAS RECEIVED TO SUPPORT OR OPPOSE CANDIDATE OR MEASURE INCLUDED IN SLATE MAILER		
			SUPPORT OPPOSE		
12/01/2017 	Riverside Sheriffs Association Pub - lic Education Fund Los Angeles CA 90017 Reference No:	Other -- Bianco for Riverside County Sheriff	X	8000.00	8000.00

Summary	SUBTOTAL	\$ 13101.00
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- Amount Received - Payments of \$100 or More
(Include all Schedule A subtotals) \$ _____
- Amount Received - Payments of Less than \$100
(Not itemized) \$ _____
- Total Payments Received (Line 1 + Line 2) Enter here and in
Column A, Line 1, of the Summary of Payments section on Page 1 \$ _____

Schedule B Payments Made

SCHEDULE B

Statement covers period from 07/01/2017 through 12/31/2017	CALIFORNIA 1992 FORM 401
	4/4
I.D NUMBER 1345655	

SEE INSTRUCTIONS ON REVERSE

NAME OF SLATE MAILER ORGANIZATION:

Educate Your Vote

NAME AND STREET ADDRESS OF PAYEE	DESCRIPTION OF PAYMENT	AMOUNT PAID
Brian Krute Carlsbad CA 92009 Reference No:	Consulting Fee	3325.00
Brian Krute Carlsbad CA 92009 Reference No:	Consulting Fee	9000.00
Netfile Mariposa CA 95338 Reference No:	Software	800.00
Tracey Pomerance-Poirier Chatsworth CA 91311 Reference No:	Reporting Services	200.00
R&D Information Rocklin CA 95765 Reference No:	Consulting Services	1600.00

Summary

	SUBTOTAL	\$ 14925.00
1. Payments of \$100 or More (Include all Schedule B subtotals)	\$	14925.00
2. Payments under \$100 This Period (Not itemized)	\$	0.00
3. Total Payments This Period (Line 1 + Line 2). Enter here and in Column A, Line 2, of the Summary of Payments section on Page 1.	\$	14925.00